PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE
Commissioner for Patents
Alexandria, Virginia 22313-1450

Fax (703)746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

11.13.0.11.0.1	339669 1300.00 OP 300.00 OP 6.00 OP	TRADEMARK CE	accompanying formal drawing I hereby certif United States P	cittal. This certificate cannot papers. Each additional paper, and that have its own certificate of received the certificate of Mailing or Transy that this Fee(s) Transmittal is ostal Service with sufficient postal seed to the Box Issue Fee address the USPTO, on the date indicated by	such as an assignment of mailing or transmission. Ismission being deposited with the age for first class mail in a sabove, or being facsimil
1751 Pinnacle Drive, Suite McLean, VA 22102-3833 1/2003 LWONDIM2 00000005 094 1:1501 1:1504 1:8001 APPLICATION NO. FI 09/939,669	339669 1300.00 OP 300.00 OP 6.00 OP	TRADEMARK CHE	I hereby certif United States P	Certificate of Mailing or Transy that this Fee(s) Transmittal is costal Service with sufficient postal seed to the Box Issue Fee address	being deposited with the age for first class mail in a sabove, or being facsimil below. (Depositor's name (Signature)
McLean, VA 22102-3833 /2003 LWONDIN2 00000005 09 1501 1504 8001 APPLICATION NO. FI 09/939,669	1300.00 OP 300.00 OP 6.00 OP	TRADEMARK CHE	I hereby certif United States P envelope addre transmitted to t	y that this Fee(s) Transmittal is ostal Service with sufficient postal ssed to the Box Issue Fee address	being deposited with the lige for first class mail in a sabove, or being facsimil below. (Depositor's name (Signature)
2003 LWONDIN2 00000005 094 2:1501 2:1504 2:8001 APPLICATION NO. FI 09/939,669	1300.00 OP 300.00 OP 6.00 OP	TRADEMARK CHE	United States P envelope addre transmitted to t	ostal Service with sufficient postal ssed to the Box Issue Fee address the USPTO, on the date indicated by	(Depositor's nan
21501 21504 28001 APPLICATION NO. FI 09/939,669	1300.00 OP 300.00 OP 6.00 OP	TRADEMARK CHE	transmitted to t	he USPTO, on the date indicated b	(Depositor's nan
### 1504 ####################################	LING DATE 08/28/2001				
APPLICATION NO. FI 09/939,669	LING DATE 08/28/2001				(Da
09/939,669	08/28/2001	FIRS			
09/939,669	08/28/2001	1	T NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
07/727,007		, 	Tadaki Sakuraba	XA-9546	4858
		•			
APPLN. TYPE SM	IALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	10/16/2003
EXAMINER		ART UNIT	CLASS-SUBCLASS		
GRAYBILL, DAVID E		2827	438-109000		
"Fee Address" indication (or "I PTO/SB/47; Rev 03-02 or more in Number is required. 3. ASSIGNEE NAME AND RESID PLEASE NOTE: Unless an assign been previously submitted to the U	ENCE DATA TO	se of a Customer BE PRINTED ON THE	registered patent attorneys or ag is listed, no name will be printed PATENT (print or type) fill appear on the patent. Inclusion ecover. Completion of this form is	i. 3	ate when an assignment l
(A) NAME OF ASSIGNEE	SP 10 or is being s	(B) RE	ESIDENCE: (CITY and STATE O	R COUNTRY)	
Hitachi, Ltd.			Tokyo, Japan		
Akita Electroni	lcs Co., L	td.	Akita, Japan		
Please check the appropriate assigne	e category or categ			al 🖾 corporation or other private	group entity governn
4a. The following fee(s) are enclose	d:		yment of Fee(s):		
☑ Issue Fee			heck in the amount of the fee(s) is ment by credit card. Form PTO-20		
Publication Fee	2	_	•		r credit any overpayment,
Advance Order - # of Copies Commissioner for Patents is request			Commissioner is hereby authorized the Count Number 50-116		

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.